

NACAR Listed (Individual) Members

Please make copies of this form as needed.

Listed Members may also be added here: <http://nacar.org/add-a-listed-member/view/form.html>

Religious Community:

Member: Associate Religious

First Name: _____ Last Name: _____

Prefix: _____ (e.g. Sr. Br. Dr. Mr. Mrs. Ms. Rev. Deacon) Suffix: _____

Position Title: _____

Address: _____

City: _____ State/Prov: _____

Zip/Postal Code: _____ Country: _____

Ph (W): (____) _____ (H): (____) _____ (C): (____) _____

Email: _____

Member: Associate Religious

First Name: _____ Last Name: _____

Prefix: _____ (e.g. Sr. Br. Dr. Mr. Mrs. Ms. Rev. Deacon) Suffix: _____

Position Title: _____

Address: _____

City: _____ State/Prov: _____

Zip/Postal Code: _____ Country: _____

Ph (W): (____) _____ (H): (____) _____ (C): (____) _____

Email: _____